# MONTANA CHEMICAL DEPENDENCY CENTER POLICY AND PROCEDURE MANUAL

Policy Subject: Employee Situation Report	
Policy Number: STP 04	A. Standards/Statutes: ARM 37.27.130
Effective Date: 01/01/02	Page 1 of 2

#### **PURPOSE:**

To provide a means for the employees to report to management and/or the safety committee a safety issue or a significant or unusual event.

### POLICY:

An Employee Situation Report form is a tool for the employees to document and refer to management and/or the safety committee any situation or event that occurs in the work place that:

Poses a safety risk, and/or

is an unusual and/or significant event that does not involve an injury to a patient or employee? (If a patient or employee is injured, the appropriate form to document the incident is on an Incident Report Form).

#### PROCEDURE:

- I. Immediately following an event or situation as described above, the staff person involved in the incident or who has knowledge of the incident, should thoroughly and accurately document the event or situation on an Employee Situation Report. The form should be signed and dated.
- II. If the event occurs during the evenings, nights, or weekends, the employee may immediately report the incident to the appropriate member of management via telephone, depending on the seriousness of the event.
- III. The Employee Situation Form will be given to personnel. Personnel will give the original to the program director and send a copy to the safety committee.
- IV. Appropriate investigation and follow-up will be directed from management and/or the safety committee.
- V. As necessary, corrective action will be taken as recommended by management and/or

## the safety committee.

Revisions:			
Prepared By:_	Colleen Todorovich, RN Name	Nursing Supervisor Title	7-12-01 Date
Approved By:			01/01/02
David J. Peshek, Administrator		ator	Date